



Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID PROVIDER MANUAL UPDATE

TO: All HIV/AIDS Waiver Services Organization providers
participating in the Virginia Medical Assistance
Program and Managed Care Organizations (MCOs)
providing services to Virginia Medicaid recipients.

UPDATE: Special

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services

DATE: 06/02/2006

SUBJECT: Update to the *AIDS Waiver Case Management Services* Provider Manual

The purpose of this memorandum is to provide information regarding changes to the preauthorization (PA) process for AIDS Waiver Case Management Services and to provide an explanation of the resulting updates to the *AIDS Waiver Case Management Services Provider Manual*. Effective June 19, 2006, KePRO, DMAS' new PA Contractor, will accept PA requests for AIDS Waiver Case Management services. These changes in the prior authorization process do not apply to drugs on the Preferred Drug List (PDL), Medicaid contracted managed care organizations, dental services, transportation, MR & Day Support Waivers. These services will continue through the current vendors. Additionally, DMAS Medical Support Division will continue to handle prior authorization for the following procedures: organ transplants, gastric bypass, cosmetic procedures, and prostheses (excluding orthotics).

KePRO IS THE NEW DMAS PA CONTRACTOR

As indicated in the March, 20, 2006 Medicaid Memorandum, DMAS has contracted with KePRO, an innovative healthcare management solution company, to conduct PA for Medicaid, Family Access to Medical Insurance Security (FAMIS) and FAMIS Plus clients in the fee-for-service programs. KePRO was awarded the PA contract through the competitive bidding process based upon their ability to implement interactive web-based technology (iExchange) and to move the PA process from a primarily fax and paper-based process to a speedier, provider-friendly paperless process that the Department believes will reduce providers' administrative burden. KePRO will also maintain a process for providers who prefer to use a traditional paper based system, *i.e.* fax, mail, or telephone. As a result of the new contract, DMAS will be implementing changes to its PA procedures.

CHANGES RELATED TO AIDS WAIVER CASE MANAGEMENT SERVICES

WVMI will continue to process all pre-authorizations, appeals, and pended cases with date of receipt up to and including, June 18, 2006. Effective on and after June 19, 2006, KePRO will accept PA requests for AIDS Waiver using DMAS' criteria.

Training will be provided by KePRO regarding their PA process via webcasts on June 12, 2006. If you are interested in participating in the AIDS Waiver WebEx training, please send an e-mail to: PAUR06@dmass.virginia.gov . Instructions will be sent to you prior to the training.

KePRO's hours of operation are from 8:00 a.m. to 7:00 p.m., Monday through Friday, EST (except on some state holidays). Information about PA is identified in the *AIDS Waiver Case Management Services Manual* and will also be available on the KePRO website in their AIDS Waiver Reference Manual. A fax form for review submission will be available on the KePRO and DMAS websites. The waiver fax form and AIDS Waiver Reference Manual are forthcoming.

The attached table shows the changes to the manual. Please download and insert the new pages in your manual and retain the attached table. The changes described in this Memorandum are effective **June 19, 2006**. The most notable changes include: (1) revisions to Chapter IV and (2) a Preauthorization Appendix D has been added.

- Timeliness for the submission of Prior Authorization of waiver services will change as follows:

Current Guidelines	New Guidelines
When insufficient information is received with the PA request for waiver services, the request is rejected and the provider must resubmit the entire request.	When insufficient information is received with the PA request for waiver services, the request is pended and the provider has three business days to submit the required information.
Providers are requested to submit additional information within 14 business days in order to avoid a denial of services.	Providers are requested to submit additional information within 14 business days in order to avoid a denial of services.
Reconsideration must be requested by the provider within 30 days. Reconsideration is completed for any denial of waiver services by the DMAS PA Contractor (WVMI). Appeal rights are given with all upheld denial decisions.	Automatic reconsideration is completed for any denial of waiver services by a KePRO Physician reviewer (PEER review). Appeal rights are given with all denial decisions.

KePRO CONTACT INFORMATION

KePRO will accept requests for initial enrollment via fax or mail. Once enrolled in the waiver, service requests for PA may be submitted via iExchange (direct data entry through the web), fax,

mail, or phone. The preferred method of submission for requesting service PA is through iExchange. At this time, enrollments may only be accepted by fax or mail.

To submit service requests via iExchange, log on to DMAS.KePRO.org and register for a provider web account. You must have a provider web account before submitting information through iExchange. To register for a web account, you must know your Medicaid provider number and tax identification number.

Submit requests via phone, fax, or mail to:

KePRO

Toll Free Phone: 1-888-VAPAUTH (1-888-827-2884)

Local Phone: (804) 622-8900

Fax: 1-877-OKBYFAX (1-877-652-9329)

2810 N. Parham Road, Suite 305

Richmond, VA 23294

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

“HELPLINE”

KePRO can be reached at 1-888-VAPAUTH (1-888-827-2884) to answer your questions regarding prior authorizations. Submit requests or questions via phone, fax, or mail to:

KePRO

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Local Phone: (804) 622-8900

Fax: 1-877-OKBYFAX (1-877-652-9329)

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COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the “DMAS Content Menu” column on the left-hand side of the DMAS web page for the “Provider Services” link, which takes you to the “Manuals, Memos and Communications” link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and

Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

AIDS WAIVER CASE MANAGEMENT SERVICES MANUAL

REVISION CHART

June 2, 2006

SUMMARY OF REVISIONS

MANUAL SECTION	MATERIAL REVISED	NEW PAGE NUMBER(S)	REVISED PAGE(S)	REVISION DATE
Chapter IV	Chapter IV (Covered Services)		Chapter IV (Covered Services)	06/19/2006
New Prior Authorization Information: Appendix D	New Appendix D		New Prior Authorization Information: Appendix D	06/19/2006
Table of Contents	Table of Contents		Table of Contents	06/19/2006

FILING INSTRUCTIONS

MANUAL SECTION	DISCARD	INSERT	OTHER INSTRUCTIONS
Chapter IV	Old Chapter IV (Covered Services)	New Chapter IV (Covered Services)	
New Prior Authorization Information: Appendix D	N/A	New Prior Authorization Information: Appendix D	
Table of Contents	Old Table of Contents	New Table of Contents	